



CALIFORNIA INTEGRATED WASTE MANAGEMENT BOARD

REQUEST FOR HEARING

PRC 44310 et. seq.

Enforcement Agency:					
Facility Name:				SWIS No:	
Facility Address:			City:		Zip Code:

Name of Petitioner:		
Requests a Hearing in the matter of (check one):		
<p><input type="checkbox"/> Denial of the SWFP (PRC 44300)</p> <p><input type="checkbox"/> Suspension of the SWFP (PRC 44305)</p> <p><input type="checkbox"/> Revocation of the SWFP (PRC 44306)</p> <p><input type="checkbox"/> Administrative Civil Penalty (PRC 45011(c))</p> <p><input type="checkbox"/> Challenge terms and/or conditions of the [issued/proposed] SWFP (PRC 44307/27 CCR 21650)</p> <p><input type="checkbox"/> Appeal an enforcement order (PRC 44307, 45017(b))</p> <p><input type="checkbox"/> Allege failure of the EA to act as required by law or regulation (PRC 44307)</p> <p><input type="checkbox"/> Appeal completeness review of Registration or Standardized permit (14 CCR 18401.4, 18105.4)</p>		

Signature:			Typed Name:		
Title:			Date:		